PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be after	ipleted where
appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence.	ice address as
indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate 122 At	DDKESS" for
maintenance fee notifications.	

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

02/23/2005

Sughrue Mion Zinn MacPeak & Seas PLLC 2100 Pennsylvania Avenue NW Washington, DC 20037-3202

06/29/2005 MBEYENE2 00000002 09518099

02 FC:1501

1400.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)

CONFIRMATION NO.

5409

FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE O58148 09/518,099 03/03/2000 Tatsuro Akabane

TITLE OF INVENTION: PRINT SYSTEM AND PRINT SYSTEM CONTROL METHOD

	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
•	nonprovisional	NO	\$1400)	\$0	\$1400	05/23/2005
[` EXAM	EXAMINER ART U		IT	CLASS-SUBCLASS]	
•	TRAN, DOUGLAS Q 2624			358-001150	-		
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 		a member a 2es of up to	
- 3	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON T	THE PATENT (print or type)			
PLEASE NOTE: Unless an assignce is identified below, no assignce recordation as set forth in 37 CFR 3.11. Completion of this form is NO	data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment.			
(A) NAME OF ASSIGNEE (E	B) RESIDENCE: (CITY and STATE OR COUNTRY)			
	inted on the patent):			
☐ Issue Fee	☐ A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)	_			
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if required) will not be accepted interest as shown by the records of the United States Patent and Trademark	tion Fee (if any) or to re-apply any previously paid issue fee to the application identified above. d from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Office.			
Authorized Signature	Date 6/27/05			
Typed or printed name GRANT K. ROWAN	Registration No. 41,278			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.